Appln. No. 10/011,011 Amdt Dated 09/06/2006 Reply to Office Communication of 03/272002 Docket No. 14XZ8/GEM-0202

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln No.

10/011,011

Confirmation No. 7584

Applicant Filed:

Sureda et al. 11/19/2001

METHOD AND SYSTEM FOR SIMULATING THE DIAMETER ENLARGEMENT OF A

TC/A.U.

2128

LESION OF A BLOOD VESSE.

Examiner Docket No.

Alhija, Saif A. 14XZ88/GEM-0202

Customer No.

23413

September 6, 2006 Date:

AMENDMENT UNDER 37 CFR 1.111

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office communication mailed 03/27/2006, submitted herewith is an amendment in the above-identified application comprising a total of eighteen (18 pages), including this amendment transmittal (2 pages), as follows: amendment (14 pages), Petition (1 pages), and Change of Address (1 page).

No additional fee is required.

X The fee has been calculated as shown below:

		SIVIALL			LANGE			
(col. 1)			(col. 2)	(col. 3)	ENTITY		K ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Added Fee	Rate	Added Fee
Total	* 61	Minus	** 58	= 3	X25 =	\$	X 50 =	\$ 150
Indep.	* 3	Minus	*** 3	= 0	X100=	\$	X200=	\$
	1		I	I	1	I		1 1

Total Added Fee

☐ First Presentation of Multiple Dependent Claim

+ 180 =

\$

CMALL

+360 = \$

\$ 150

LARGE

* If the entry in col. 1 is less than the entry in col. 2, enter "0" in col. 3.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP PETITIONS, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to or Express Mail No. EV 748034271 US on the date indicated below.

Date:

September 6, 2006

^{**} If the "Highest No. Previously Paid For" in this space is less than 20, enter "20".

^{***} If the "Highest No. Previously Paid For" in this space is less than 3, enter "3".

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> Attorney Docket No. 14XZ88/GEM-0202 Appln. No. 10/011,011

\wp	Please charge Deposit Account No. 50-2513 in the amount of \$ 150.00. A duplicate copy of this sheet is attached.						
	A check in the amount of \$ (check no.) is attached. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2513. A duplicate copy of this sheet is attached.						
	Any filing fees under 37 CFR 1.16 for the presentation of extra claims.						
	Any patent application processing fees under 37 CFR 1.17.						
	Respectfully submitted,						
	SUREDA ET AL.						
	By Jay L. Chaskin Attorney for Applicant Reg. No. 24030						
Enclosures:							
Ø	Amendment Transmittal (2 pages)						
	Amendment (14 pages)						
	Amendment (14 pages) Change of Address (1 page) Drawing Replacement Sheet(s) (page)						
	Drawing Replacement Sheet(s) (page)						
	Drawing Annotated Sheet(s) (page)						
½							
	Information Disclosure Statement (pages)						
	PTO/SB08A (1 pages); PTO-SB/08B (pages)						
	Cited Documents (pages)						
☐ Concise Explanation (pages)							
	Other: Petition (pages)						